2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#721191

Entity Name: CROWN OAKS, INC.

FILED Apr 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 882 JACKSON AVE. WINTER PARK, FL 32789 US **Current Mailing Address: New Mailing Address:** 882 JACKSON AVE WINTER PARK, FL 32789 US FEI Number: 59-2480919 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MALCOM, THOMAS D BRACKIN, ANDREA 882 JACKSON AVE. 882 JACKSON AVE. WINTER PARK, FL 32789 WINTER PARK, FL 32789 US US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: ANDREA BRACKIN 04/15/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition HILL, ELIZABETH Name: Name: 114 CROWN OAKS WAY Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: VTD Title: () Delete () Change () Addition ROSE, BRUCE Name: Name: Address: 213 CROWN OAKS WAY Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: PD() Delete Title: () Change () Addition HILL, ELIZABETH Name: Name: Address: 114 CROWN OAKS WAY Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition Name: DUER, GENEVA Name: DUER, GENEVA Address: 109 CROWN OAKS WAY Address: 109 CROWN OAKS WAY City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: LONGWOOD, FL 32779 Title: () Delete Title: (X) Change () Addition MEYERS, COLLEN FISHER, EDNA Name: Name: 1227 WILKINSON ST. 105 CROWN OAKS WAY Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32779 Title: () Delete Title: () Change () Addition SMALL, LYNN Name: Name: Address: 214 CROWN OAKS WAY Address: LONGWOOD, FL 32779 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENEVA DUER SD 04/15/2004